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## BIB DATA SHEET

CONFIRMATION NO. 5645

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/502,519	01/14/2005	222	3651	PG4657USw		
<b>RULE</b>						
<b>APPLICANTS</b> Gregor John McLennan Anderson, Ware, Hertfordshire, GBN, UNITED KINGDOM; Stanley George Bonney, Ware, Hertfordshire, GBN, UNITED KINGDOM; Michael Birsha Davies, Ware, Hertfordshire, GBN, UNITED KINGDOM; Daniel Thomas De Sausmarez Lintell, Ware, Hertfordshire, GBN, UNITED KINGDOM; Alan Anthony Wilson, Ware, Hertfordshire, GBN, UNITED KINGDOM;						
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP03/00598 01/22/2003						
<b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0201677.2 01/25/2002						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b>						
Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b>	<b>SHEETS DRAWINGS</b>	<b>TOTAL CLAIMS</b>	<b>INDEPENDENT CLAIMS</b>
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Initials	GBN	27	77	1
Verified and Acknowledged	/RAKESH KUMAR/ Examiner's Signature					
<b>ADDRESS</b> GLAXOSMITHKLINE CORPORATE INTELLECTUAL PROPERTY, MAI B475 FIVE MOORE DR., PO BOX 13398 RESEARCH TRIANGLE PARK, NC 27709-3398 UNITED STATES						
<b>TITLE</b> Medicament dispenser						
<b>FILING FEE RECEIVED</b> 2076	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees		
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